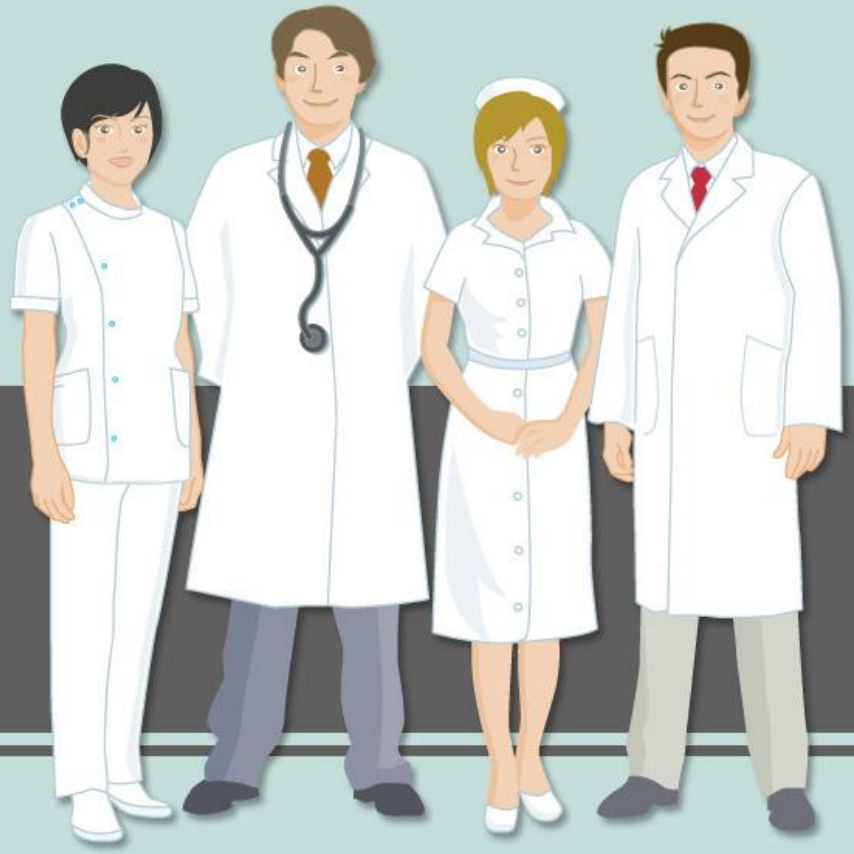
A National Survey of Faculty Knowledge and Experience with Lesbian, Gay, Bisexual and Transgender (LGBT) Health and Readiness for Inclusion in Teaching: Curricular Implications



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Objectives, Disclosure and COI

Learning Outcomes

- Discuss findings of survey of faculty knowledge and experience with LGBT health and readiness for inclusion in teaching in BSN programs.
- Identify strategies for LGBT health inclusion in the nursing.
- Foster discussion of LGBT health disparities in practice, education, research and policy in nursing.

Disclosure – No financial or commercial disclosure to report

Conflict of Interest – No conflict of interest to report

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Global Perspective

"LGBT people are born into and belong to every society in the world. They are all ages, all races, all faiths; they are doctors and teachers, farmers and bankers, soldiers and athletes; and whether we know it, or whether we acknowledge it, they are our family, our friends, and our neighbors."

Hillary Clinton, December 2011 address to the United Nations

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Background

- LGBT Health Disparities
- Social Determinants of Health
- Minority Stress
- Intersectionality
- The Nursing Response
- Uneven Research
- Social Justice

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Method

- A Likert-type survey questionnaire was sent to a non-probability sample of chief administrative leaders of nursing schools listed on the public websites of the American Association of Colleges of Nursing(AACN) (*N*=739), who were asked to share the link with their faculty.

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Results

- 1,119 faculty participants - 151 LGBT, and 638 heterosexual respondents

Knowledge

- 37% never or seldom aware of LGBT issues
- 43% limited or somewhat limited knowledge
- 70% indicated never or seldom read about LGBT health-related articles

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Results

Experience

- Up to 63% either never or seldom taught LGBT health
- Median time teaching was 2.12 hours
- Frequently taught: homophobia, HIV and STIs, youth issues, and violence
- Least taught: obesity, high rate of tobacco, alcohol and drug use, inadequate access, and minority stress.

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Results

Readiness

- 52% fully or adequately ready to integrate
- 56% fully or adequately comfortable to integrate LGBT health
- LGBT faculty reported greater awareness, knowledge, and readiness compared with heterosexual faculty

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Results

Faculty Development

- 80% never or occasionally brought up LGBT health topics in faculty meetings
- 64% said faculty development programs are important or very important
- Facilitators and Barriers: curriculum, faculty, institution/policy and stakeholders

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Limitations

- Non-probability sampling
- Number of faculty who actually received the link to the survey is unknown
- Self-selection
- Social desirability bias
- Regional differences and patterns in non-BSN program is unknown

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Implications and Strategies

- **Education** – Curriculum mapping
- **Practice** – Systems barriers, training
- **Research** – Outcome studies, interventions
- **Policy** – Mission, Advocacy, Accreditation

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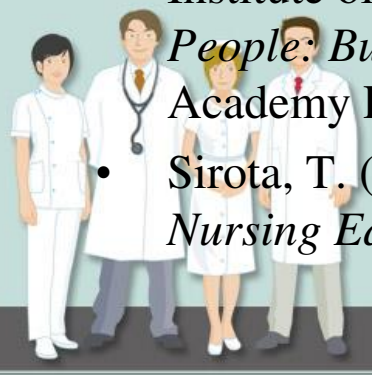

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